

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400040020-2

IC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

SAPC 2126
D. O. Vou. No. 81
COPY 1 OF 3
Bu. Vou. No. 81

U. S. Cost Reimbursable-

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 495

To

(Payee)

PAID BY

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				1,729.92	✓
		STATINTL					
		STATINTL					
Use continuation sheet(s) if necessary							
Total						1,729.92	✓

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from

to

Weight

Government B/L No.

(Payee must NOT use this space)

I certify that the above bill is correct and just and that payment therefor has not been received.

(Sign original only)

Differences

Date 8-29-55

Account verified; correct for
(Signature or initials) JMS

1,729.92

Contract No.

A101

Date

Req. No.

Date

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

Approved for \$

STATINTL

Authorized Certifying Officer)

By

SIGN
ORIGINAL
ONLY

T

Contracting Officer

Richard M. Bissell, Jr.

Title Project Director

STATINTL

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)

ACCOUNTING CLASSIFICATION (For completion by Administrative Units)						
Appropriation, limitation, or project symbol	Appropriation title				Limit'n. or Proj't. Amount	Appropriation Amount
Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. 10,381,985 dated 19 Oct 1955, for \$ 47,923.94 } on Treasurer of the United States in favor of payee named above.
Cash, \$, on 19 Payee (Sign original only)

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In this Voucher for Purchases and
Services Other Than Personal

CONTINUATION SHEET

U. S. Cost Reimbursable- Sheet No. 1 of Bureau Voucher No. 87
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		<u>PAYROLL SYSTEM L</u> Direct Labor Costs properly chargeable to Contract A101 for the period 9/19/55 thru 9/25/55. Week Ending 9/25/55 Credit: Duplicate Billing of Labor for W/E 6/12/55 on Vo.#26 * STATINTL Overhead computed at interim rate of [REDACTED] STATINTL * Vo #26 checked, however, as presented, the duplication of billing cannot be determined. JRS 25X1A [REDACTED]					
						1,729.92	✓

Handwritten calculations and notes:

13.228
257.60
2126.58
456.96
1729.92

1051.12
217.76
328.88

19920
2726
96